

# Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.  
Do not use this form to update information

Amendment

☐ Yes

☒ No

## 1. Committee Information

a. Full Name Committee to Elect Roger Fish Mayor	c. ID Number RF122214
b. Mailing Address (include City, State and Zip Code) 3905 Waters Reach Ln Indian Trail, NC 28079	d. Date Filed 10/26/2015
	e. Phone Number 704 821 6577

2. Report Year 2015	3. Period Start Date (mm/dd/yy) 01/01/2015	4. Period End Date (mm/dd/yy) 10/19/2015	5. Treasurer Full Name Nancy Lynn Jacobsen
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	<input type="checkbox"/> Municipal	<input type="checkbox"/> State/County	<input type="checkbox"/> Referendum
<input type="checkbox"/> PAC	<input type="checkbox"/> Referendum	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Independent Expenditure	<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
<input type="checkbox"/> Legal Expense Fund		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
7. Type of Fund (if applicable, check one)		<input checked="" type="checkbox"/> Pre-election	<input type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> Other:		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	
		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
			<input type="checkbox"/> Special	
8. Number of Fundraisers this Report 0		10. Special Report Name		

11. Account Information		11. Account Information	
a. Financial Institution Full Name BB+T		a. Financial Institution Full Name PayPal	
b. Purpose Checking	c. Account Code A	b. Purpose Online payment and receipt	c. Account Code B
	d. Period Begin Balance \$ 350.00		d. Period Begin Balance \$ 0.00

## CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.

Nancy Jacobsen

Printed Name of Signer

*Nancy Jacobsen*  
Signature of Appointed Treasurer

10/26/2015

Date

## FOR OFFICE USE ONLY

Date Received: 10/28/15  
Date Postmarked: 10/26/15  
Date Scanned: 10/28/15  
Date Data Entered: \_\_\_\_\_

Employee: *K. Jaumh*  
Employee: *K. Jaumh*  
Employee: *K. Jaumh*  
Employee: \_\_\_\_\_

## Delivery Method

☒ Normal Mail  
☐ Registered Mail  
☐ Hand Delivered  
☐ Electronically Filed  
☐ Signer has not received mandatory training

**Please Note:** This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

# Detailed Summary

Amendment

☐ Yes ☒ No

Use this form to summarize all disclosure reporting forms and to total monetary information.

<b>1. Committee Full Name (and Fund if applicable)</b> Committee to Elect Roger Fish Mayor		<b>2. Type of Report</b> Pre-Election		<b>3. ID Number</b> RF122214	
<b>Start of Election Cycle:</b> January 1, <u>2015</u>		<b>Total this Reporting Period</b>		<b>Total this Election Cycle</b>	
4) Cash on Hand at Start		\$ 3,492.51		\$	
<b>RECEIPTS</b>					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 100.00		\$ 1,100.00	
6) Contributions from Individuals (CRO-1210)		\$ 100.00		\$ 6,936.02	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$ 2,000.00	
10) Refunds/Reimbursements To the Committee (CRO-1240)		\$ 150.00		\$ 150.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-for-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund – Other Sources (CRO-1270)		\$		\$	
11 e) Exempt Purchase Price Sales (CRO-1265)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 350.00		\$ 10,186.02	
<b>EXPENDITURES</b>					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 1,263.50		\$ 7,480.99	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$		\$	
16) Refunds/Reimbursements From the Committee (CRO-1320)		\$		\$	
17) In-Kind Contributions (CRO-1510)		\$		\$ 126.02	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,263.50		\$ 7,607.01	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 2,579.01		\$ 2,579.01	
<b>ADDITIONAL INFORMATION</b>					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 2,000.00			
22) Debts and Obligations owed By the Committee (CRO-1610)		\$ 103.47			
23) Debts and Obligations owed To the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum Union Co. Board of Elections (CRO-2200)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

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OCT 28 2015

### Aggregated Contributions from Individuals

1 of 1

☐ Yes ☒ No

Optional form used to report NC Contributions From Individuals of \$50 or less

[illegible]

# Contributions from Individuals

Pg 1 of 1 Amendment ☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

<b>1. Committee Full Name (and Fund if applicable)</b>						<b>2. ID Number</b>	
Committee to Elect Roger Fish Mayor						RF122214	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)  Robert Hinson 3018 Hampton Downs Dr. Monroe, NC 28112-7440 704 218 3118				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
				Teacher			
				<b>c. Employer's Name/Specific Field</b>			
				Education Services		<b>e. Election Sum to Date</b>	
				\$ 200.00			
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>	A	Check		10/17/2015		\$ 100.00	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b>			
						<b>e. Election Sum to Date</b>	
				\$			
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove							
				<b>b. Job Title/Profession</b>		<b>d. Comments</b>	
				<b>c. Employer's Name/Specific Field</b>			
						<b>e. Election Sum to Date</b>	
				\$			
<b>f. Prior</b>	<b>g. Account Code</b>	<b>h. Form of Payment</b>	<b>i. In-Kind Description</b>	<b>j. Date (mm/dd/yyyy)</b>		<b>k. Amount</b>	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<input type="checkbox"/>						\$	
<b>4. Total only this Page</b>							
						\$ 100.00	
<b>5. Total of ALL CRO-1210 Pages</b>							
Union Co. Board of Elections						\$ 100.00	
(This line must be on line 6 of Detailed Summary Page CRO-1100)							

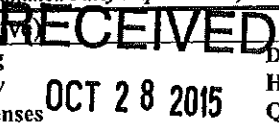
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OCT 28 2015

# Disbursements

Pg 1 of 2 Amendment ☐ Yes ☒ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

<b>1. Committee Full Name (and Fund if applicable)</b> Committee to Elect Roger Fish Mayor					<b>2. ID Number</b> RF122214	
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) All Star Signs 241 Post Office Dr., Suite 7A Indian Trail, NC 28079 704 821 4330			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 324.50	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Debit Card	B	09/24/2015	\$ 167.07	Signs and Stake	
				\$		
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Charlotte Media Group, LLC 10100 Park Cedar Dr., Ste 154 Charlotte, NC 28210 704 849 2261			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 670.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Debit Card	A	09/28/2015	\$ 402.00	Ad	
A	Debit Card	A	10/06/2015	\$ 134.00	Ad	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) Charlotte Media Group, LLC 10100 Park Cedar Dr., Ste 154 Charlotte, NC 28210 704 849 2261			b. Coordinated Committee Name		d. Comments	
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		e. Election Sum to Date	
					\$ 670.00	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Debit Card	A	10/13/2015	\$ 134.00	Ad	
A	Debit Card	A	10/19/2015	\$ 134.00	Ad	
					\$ 971.07	
<b>5. Total only this Page</b>						
<b>6. Total of ALL CRO-1310 Pages</b> (This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses) (This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)					\$ 1,263.50	
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)						
<div style="display: flex; justify-content: space-between;"> <div> A* - Media E - Salaries I - Postage O* - Other </div> <div> B* - Printing F* - Equipment J - Penalties </div> <div> C* - Fundraising G - Political Party K* - Office Expenses </div> <div> D - To Another Candidate H* - Holding Public Office Expenses Q* - Donation to Legal Expense Fund </div> </div>						
<div style="text-align: center;">   Union Co. Board of Elections </div>						
* Codes require detailed explanation in required remarks						

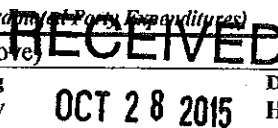
# Disbursements

Pg 2 of 2

Amendment

☐ Yes ☒ No

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

<b>1. Committee Full Name (and Fund if applicable)</b>					<b>2. ID Number</b>	
Committee to Elect Roger Fish Mayor					RF122214	
<b>3. Type of Disbursement</b> <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input checked="" type="checkbox"/> Operating Expenses <input type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Roger Fish 11001 Magna Ln Indian Trail, NC 28079 704 635 5390						
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:			
					e. Election Sum to Date	
					\$ 465.08	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	K	10/19/2015	\$ 23.21	Office Supplies	
A	Check	O	10/19/2015	\$ 47.91	Event Candy	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Roger Fish 11001 Magna Ln Indian Trail, NC 28079 704 635 5390						
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:			
					e. Election Sum to Date	
					\$ 465.08	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	I	10/19/2015	\$ 18.82	Postage	
A	Check	K	10/19/2015	\$ 33.75	Inkjet Refill	
<b>4. Payee Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip)			b. Coordinated Committee Name		d. Comments	
Roger Fish 11001 Magna Ln Indian Trail, NC 28079 704 635 5390						
			c. Level Registered (Specify)			
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:			
					e. Election Sum to Date	
					\$ 465.08	
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
A	Check	K	10/19/2015	\$ 168.74	Toner	
				\$		
<b>5. Total only this Page</b>					\$ 292.43	
<b>6. Total of ALL CRO-1310 Pages</b>					\$ 1,263.50	
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>						
<b>7. Purpose Codes</b> (List detailed expenditure code in (h.) above)						
<div style="display: flex; justify-content: space-between;"> <div> A* - Media E - Salaries I - Postage O* - Other </div> <div> B* - Printing F* - Equipment J - Penalties </div> <div> C* - Fundraising G - Political Party K* - Office Expenses </div> <div> D - To Another Candidate H* - Holding Public Office Expenses Q* - Donation to Legal Expense Fund </div> </div>						
<div style="text-align: center;">   OCT 28 2015  Union Co. Board of Elections </div>						
* Codes require detailed explanation in required remarks field (k)						

Use this form to report proceeds from a loan and loan endorser's information  
A loan proceeds statement must accompany each loan that is from an individual

1

**No**

April 2007

# Debts and Obligations Owed By the Committee

Pg 1 of 4

Amendment

☐ Yes ☒ No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Roger Fish Mayor		RF122214	
<b>3. Creditor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>Note:</b> All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
Katherine Lucille Busby 11003 Magna Lane Indian Trail, NC 28079		<b>b. Description of Creditor</b>  Private Person	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 0	\$ 28.53	\$ 28.53	\$ 28.53
<b>g. Incurred Debts (what the committee received this period)</b>			
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
Cathy's Coffee  606 Indian Trail Road South Indian Trail, NC 28079 (704) 821-7375		10/17/2015	\$ 28.53
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
		O	Food & Beverage
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>4. Total only this Page</b> (This should be the sum of all items 'g3.' from this page)		\$ 28.53	
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 103.47	
<b>6. Purpose Codes (List detailed expenditure code in (g4.))</b>			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	L* - Other
* Codes require detailed explanation in required remarks field (g5.)			

RECEIVED

CRO-1610

NC State Board of Elections

OCT 28 2015

February 2011

Union Co. Board of Elections



# Debts and Obligations Owed By the Committee

Pg 2 of 4 Amendment ☐ Yes ☒ No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Roger Fish Mayor		RF122214	
<b>3. Creditor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>Note: All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.</b>	
Gail Marie Furr 1002 Horton Ridge Ct. Indian Trail, NC 28079 (704) 684 1331		<b>b. Description of Creditor</b> Private Person	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 0	\$ 0	\$ 27.40	\$ 27.40
<b>g. Incurred Debts (what the committee received this period)</b>			
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
Paper & Inc. Printing 740 Stallings Rd. Matthews, NC 28104 (704) 821-4500		10/02/2015	\$ 82.20/3
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
		B	Postcards
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>4. Total only this Page</b> (This should be the sum of all items 'g3.' from this page)		\$ 27.40	
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 103.47	
<b>6. Purpose Codes (List detailed expenditure code in (g4.))</b>			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	* Other
* Codes require detailed explanation in required remarks field (g5.)			

CRO-1610

NC State Board of Elections

OCT 28 2015

February 2011

Union Co. Board of Elections

# Debts and Obligations Owed By the Committee

Pg 4 of 4 Amendment ☐ Yes ☒ No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Roger Fish Mayor		RF122214	
<b>3. Creditor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>Note:</b> All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
Gail Marie Furr 1002 Horton Ridge Ct. Indian Trail, NC 28079 (704) 684 1331		<b>b. Description of Creditor</b>  Private Person	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 0	\$ 0	\$ 39.00	\$ 39.00
<b>g. Incurred Debts (what the committee received this period)</b>			
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
United States Post Office 101 S Charlotte Ave. Monroe, NC 28112 (704) 225-1097		08/27/2015	\$ 117.00/3
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
		I	Stamps
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>4. Total only this Page</b> (This should be the sum of all items 'g3.' from this page)		\$ 39.00	
<b>5. Total of ALL CRO-1610 Pages</b> (This line must be on line 22 of Detailed Summary Page CRO-1100)		\$ 103.47	
<b>6. Purpose Codes (List detailed expenditure code in (g4.))</b>			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	O* - Other
* Codes require detailed explanation in required remarks field (g5.)			

CRO-1610

NC State Board of Elections

February 2011

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Union Co. Board of Elections

# Debts and Obligations Owed By the Committee

Pg 3 of 4 Amendment ☐ Yes ☒ No

Use this form to report any unpaid debts or obligations owed by the committee, to include campaign credit card purchases.

<b>1. Committee Full Name (and Fund if applicable)</b>		<b>2. ID Number</b>	
Committee to Elect Roger Fish Mayor		RF122214	
<b>3. Creditor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove			
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>Note:</b> All payments made toward debts should be listed on form CRO-1310 with the payee listed as this creditor.	
Pam DeMaria 1108 Hunters Trail Dr. Indian Trail, NC 28079 (704) 621 7336		<b>b. Description of Creditor</b> Private Person	
<b>c. Beginning Balance</b>	<b>d. Total Amount Paid</b>	<b>e. Total Amount Incurred</b>	<b>f. Remaining Balance</b>
\$ 0	\$ 0	\$ 8.54	\$ 8.54
<b>g. Incurred Debts (what the committee received this period)</b>			
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
Call Printing & Copying 311 Indian Trail Rd. Indian Trail, NC 28079 (704) 821-6556		09/22/2015	\$ 25.62/3
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
		B	Event Signs/Forms
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>g1. Purchase Place Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)		<b>g2. Date (mm/dd/yyyy)</b>	<b>g3. Amount</b>
			\$
		<b>g4. Purpose Code</b>	<b>g5. Required Remarks</b>
<b>4. Total only this Page</b>		\$ 8.54	
(This should be the sum of all items 'g3.' from this page)			
<b>5. Total of ALL CRO-1610 Pages</b>		\$ 103.47	
(This line must be on line 22 of Detailed Summary Page CRO-1100)			
<b>6. Purpose Codes (List detailed expenditure code in (g4.))</b>			
A* - Media	B* - Printing	C* - Fundraising	D - To Another Candidate
E - Salaries	F* - Equipment	G - Political Party	H* - Holding Public Office Expenses
I - Postage	J - Penalties	K* - Office Expenses	O* - Other
* Codes require detailed explanation in required remarks field (g5.)			

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NC State Board of Elections

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Union Co. Board of Elections

# Refunds/Reimbursements To the Committee

Pg 1

of 1

Amendment

☐ Yes

☒ No

Use this form to report refunds received by the committee or reimbursements for a previous expenditure.

<b>1. Committee Full Name (and Fund if applicable)</b>				<b>2. ID Number</b>	
Committee to Elect Roger Fish Mayor				RF122214	
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>d. Type of Committee</b>		<b>g. Comments</b>
Metrolina Native American Association 8001 N. Tryon Street Charlotte, NC 28262 704 750 9609			<input checked="" type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			<b>e. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input checked="" type="checkbox"/> Municipality:		
					<b>h. Original Expenditure Date</b> 08/18/2015
					<b>i. Original Expenditure Amt</b> \$ 150.00
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>f. Purpose</b>	
N/A		Non-profit organization		Ad in Program Book	
				<b>j. Election Sum to Date</b> \$ 150.00	
<b>k. Account Code</b>	<b>l. Form of Payment</b>	<b>m. In-Kind Description</b>		<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>
B	Check			10/05/2015	\$ 150.00
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>d. Type of Committee</b>		<b>g. Comments</b>
			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			<b>e. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>h. Original Expenditure Date</b>
					<b>i. Original Expenditure Amt</b> \$
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>f. Purpose</b>	
				<b>j. Election Sum to Date</b> \$	
<b>k. Account Code</b>	<b>l. Form of Payment</b>	<b>m. In-Kind Description</b>		<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>
					\$
<b>3. Contributor Information</b> <input type="checkbox"/> Add <input type="checkbox"/> Remove					
<b>a. Full Name, Mailing Address &amp; Phone</b> (include city, state, & zip)			<b>d. Type of Committee</b>		<b>g. Comments</b>
			<input type="checkbox"/> Candidate <input type="checkbox"/> PAC		
			<input type="checkbox"/> Referendum <input type="checkbox"/> Party		
			<b>e. Level Registered (Specify)</b>		
			<input type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					<b>h. Original Expenditure Date</b>
					<b>i. Original Expenditure Amt</b> \$
<b>b. Job Title/Profession</b>		<b>c. Employer's Name/Specific Field</b>		<b>f. Purpose</b>	
				<b>j. Election Sum to Date</b> \$	
<b>k. Account Code</b>	<b>l. Form of Payment</b>	<b>m. In-Kind Description</b>		<b>n. Date (mm/dd/yyyy)</b>	<b>o. Amount</b>
					\$
<b>4. Total only this Page</b>					\$ 150.00
<b>5. Total of ALL CRO-1240 Pages</b> (This line must be on line 10 of Detailed Summary Page CRO-1100)					\$ 150.00

RECEIVED

OCT 28 2015 NC State Board of Elections

CRO-1240

December 2007

Union Co. Board of Elections